

DEPARTMENT OF WATER RESOURCES

SAN JOAQUIN DISTRICT
3374 East Shields Avenue
Fresno, CA. 93726-6913
(559) 445-5443



Release of Information
Owner

Attention: Carlynn Mayer

I certify that I am the owner of the well located at:

_____	_____
Street Address	City and County
_____	_____
Assessor's Parcel Number	Township, Range, and Section

(Use the back of this sheet to add any other information that would help locate the well or to draw a sketch of the well location. Information may include subdivision and lot number, State well number, or a physical description of the location of the property in relation to other streets, landmarks, etc.)

The well was drilled for _____
Name of the Original Owner

_____ by _____
Date or Year Drilled Name of Water Well Driller

I request a copy of the Water Well Driller Report for my well be released to:

Name

Company or Consultant

Mailing Address

City, State, and Zip Code

Signature (owner of well)

Address

City, State, and Zip Code

Date